PART B -	FEE(S) TRANSMITTAL

		this form, together w	4 2005	or <u>Fa</u>	P.O. Box 1450 Alexandria, Vii x (571) 273-2885	for Patents rginia 22313-1450	
INSTR approprinticate	UCTIONS: This for riate. All further conducted unless corrected	form should be pard for the onespondence in the ding the leaves or directed therewises	e Patent, advance or se in Blood , by (a	JE FEE and PU rders and notific a) specifying a r	JBLICATION FEE (if requation of maintenance fees new correspondence address	uired). Blocks 1 through 5 will be mailed to the currents; and/or (b) indicating a sep	should be completed w correspondence addre arate "FEE ADDRESS
CURF	RENT CORRESPONDEN	NCE ADDRESS (Note: Use Block 11 7590 08/24/2005	or my change of address)		Note: A certificate of Fee(s) Transmittal.	of mailing can only be used finis certificate cannot be used nal paper, such as an assignmate of mailing or transmission.	or domestic mailings of for any other accompar
IN 37		L PROPERTY DEPT.			I hereby certify that States Postal Service addressed to the M transmitted to the US	ertificate of Mailing or Tran this Fee(s) Transmittal is beir with sufficient postage for fi ail Stop ISSUE FEE address BPTO (571) 273-2885, on the	smission ng deposited with the U rst class mail in an env s above, or being facs date indicated below. (Depositor's
2501 1504	700.00 300.00	DA Da			Alaci	isan Gorgon	(Sign
8001	15.00		1	TIN CT 11 1 TEN F	/\\ <i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		· · · · · · · · · · · · · · · · · · ·
API	10/790,396	03/01/2004		Shumin Y		IM-1-C1-PUS-1	CONFIRMATION NO
HILE	OF INVENTION:	CANINE AND FELINE B7	-z ikoiems, co	an oon ions i	AND OSES HEREOF		
	APPLN. TYPE	SMALL ENTITY	ISSUE F	FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
л	nonprovisional	YES	\$700)	\$300	. \$1000	11/25/2005
	EXA	MINER	ART U	NIT '	CLASS-SUBCLASS		
	OUSPEN	NSKI, ILIA I	1644	1	530-350000	lies	
CFR 1.3 Adds	OUSPEN nge of corresponden 363). Change of correspon tress form PTO/SB/ 'Fee Address' indic 0/SB/47; Rev 03-02		1644 Fee Address" (37 of Correspondence	2. For printir (1) the name or agents OR (2) the name registered at 2 registered		ent attorneys 1 Hesk s a member a umes of up to	a Corpora
CFR 1.3 Adda PTO Num	OUSPEN nge of corresponden 363). Change of correspon ress form PTO/SB/ 'Fee Address" indic 0/SB/47; Rev 03-02 nber is required.	NSKI, ILIA I nce address or indication of " ndence address (or Change of 122) attached. atton (or "Fee Address" Indication (or more recent) attached.	Fee Address" (37 of Correspondence cation form (se of a Customer	2. For printing (1) the name or agents OR (2) the name registered at 2 registered listed, no nai	530-350000 Ing on the patent front page, es of up to 3 registered pat a literatively, e of a single firm (having a torney or agent) and the na patent attorneys or agents. me will be printed.	ent attorneys 1 Hesk s a member a umes of up to	a Corpora
CFR 1.3 Adda PTO Num 3. ASSI PLE recor	OUSPEN nge of corresponden 363). Change of correspon ress form PTO/SB/ 'Fee Address" indic 0/SB/47; Rev 03-02 nber is required. IGNEE NAME AN ASE NOTE: Unleaded and a set forth	nce address or indication of " indence address (or Change of 122) attached. intended in the common of the common o	Fee Address" (37 of Correspondence cation form (se of a Customer BE PRINTED ON below, no assignee n of this form is NO	2. For printing (1) the name or agents OR (2) the name registered at 2 registered listed, no nate THE PATENT (1) data will appea of a substitute for	530-350000 Ing on the patent front page, es of up to 3 registered pate, alternatively, es of a single firm (having autorney or agent) and the napatent attorneys or agents. The will be printed. Sprint or type) In on the patent. If an assignment.	ent attorneys 1 Hesk s a member a 2 unes of up to If no name is 3 gnee is identified below, the	
CFR 1.3 Adda PTO Num 3. ASSI PLE recon	OUSPEN nge of corresponden 363). Change of corresponden ress form PTO/SB/ 'Fee Address" indic //SB/47; Rev 03-02 nber is required. IGNEE NAME AN ASE NOTE: Unleaddion as set forth NAME OF ASSIGN	nce address or indication of " indence address (or Change of 122) attached. intended in the common of the common o	Fee Address" (37 of Correspondence cation form (se of a Customer BE PRINTED ON below, no assignee n of this form is NO	2. For printing (1) the name or agents OR (2) the name registered at 2 registered listed, no nate THE PATENT (1) data will appea of a substitute for	530-350000 Ing on the patent front page, es of up to 3 registered pat x, alternatively, e of a single firm (having a torney or agent) and the na patent attorneys or agents. In the printed of the printed of the patent attorneys or agents. In the printed of the printed of the printed of the patent. If an assignment or filing an assignment.	ent attorneys 1 Hesk s a member a 2 unes of up to If no name is 3 gnee is identified below, the	
CFR 1.3 Addi "PTO Num 3. ASSI PLE recon (A) 1	OUSPEN nge of corresponden 363). Change of correspon ress form PTO/SB/ Fee Address" indic 0/SB/47; Rev 03-02 nber is required. IGNEE NAME AN ASE NOTE: Unlex rdation as set forth NAME OF ASSIGN Heska.	nce address or indication of " ndence address (or Change of 122) attached. ration (or "Fee Address" Indication for more recent) attached. UPD RESIDENCE DATA TO ss an assignee is identified in 37 CFR 3.11. CompletionNEE	Fee Address" (37 of Correspondence cation form se of a Customer BE PRINTED ON below, no assignee n of this form is NO	2. For printing (1) the name or agents OR (2) the name registered at 2 registered listed, no nate of the part of t	530-350000 Ing on the patent front page, es of up to 3 registered pate, alternatively, et of a single firm (having autorney or agent) and the napatent attorneys or agents. In the me will be printed. Sprint or type) In on the patent. If an assign filing an assignment. It (CITY and STATE OR Cond.)	ent attorneys 1 Hesk s a member a 2 unes of up to If no name is 3 gnee is identified below, the	document has been file
CFR 1.3 Adda "PTO Num 3. ASSI PLE recon (A) 1	OUSPEN The of correspondent of the state of	nce address or indication of " ndence address (or Change of 122) attached. nation (or "Fee Address" Indictor more recent) attached. Let the DRESIDENCE DATA TO ass an assignee is identified in 37 CFR 3.11. Completion NEE Orporation nte assignee category or category enclosed:	Fee Address" (37 of Correspondence cation form lise of a Customer BE PRINTED ON below, no assignee n of this form is NO (I	2. For printing (1) the name or agents OR (2) the name registered at 2 registered listed, no nate of the part of t	solution in the patent front page, es of up to 3 registered pate, alternatively, e of a single firm (having autorney or agent) and the ne patent attorneys or agents. The will be printed. Sprint or type) The or on the patent. If an assign filing an assignment. The color of the patent of the fee(s) is the amount of the fee(s) is	ent attorneys 1 Hesk s a member a unes of up to If no name is 3 gnee is identified below, the OUNTRY) Corporation or other private g enclosed.	document has been file
CFR 1.3 Adda PTO Num 3. ASSI PLE recon (A) 1 Please c 4a. The	OUSPEN The of correspondent of the state of	nce address or indication of " indence address (or Change of 122) attached. Indence address (or Change of 122)	Fee Address" (37 of Correspondence cation form lise of a Customer BE PRINTED ON below, no assignee n of this form is NO (I	2. For printing (1) the name or agents OR (2) the name registered at 2 registered listed, no nai THE PATENT (1) data will appear of a substitute for B) RESIDENCE Lovelar rinted on the pate b. Payment of Fe	solution in the patent front page, es of up to 3 registered pate, alternatively, e of a single firm (having autorney or agent) and the mapatent attorneys or agents. me will be printed. Sprint or type) ar on the patent. If an assign filing an assignment. CICITY and STATE OR CO. In d. CO. In d. CO. Individual cee(s): the amount of the fee(s) is y credit card. Form PTO-20	ent attorneys 1 Hesk s a member a unes of up to If no name is 3 gnee is identified below, the OUNTRY) Corporation or other private g enclosed.	document has been file
CFR 1.3 Add TO Num 3. ASSI PLE record (A) 1 Please C 4a. The A 5. Char	OUSPEN Tige of corresponden 363). Change of corresponden The Address' indic OSB/47; Rev 03-02 The required. IGNEE NAME AN ASE NOTE: Unleaded to the control The SKA Check the appropriate following fee(s) are issue Fee Publication Fee (No Advance Order - # Inge in Entity Status Applicant claims	ndence address or indication of "indence address (or Change of 122) attached. Tation (or "Fee Address" Indiction (or "Fee Address" Indiction more recent) attached. Upper Indiction of the Indiction of the Indiction of the Indiction of the Indiction of Indiction of Copies	The Address" (37 of Correspondence scation form (se of a Customer BE PRINTED ON below, no assignee n of this form is NO (I)	2. For printing (1) the name or agents OR (2) the name registered at 2 registered at 3 registered (1) at a substitute for B) RESIDENCE Lovelar rinted on the pate b. Payment of Fe A check in Payment by The Direct Deposit Accou	ng on the patent front page, es of up to 3 registered pat R, alternatively, e of a single firm (having a torney or agent) and the na patent attorneys or agents. me will be printed. Iprint or type) or on the patent. If an assign filing an assignment. It (CITY and STATE OR Condition of the fee(s): the amount of the fee(s) is y credit card. Form PTO-20 tor is hereby authorized by ant Number 1813.	ent attorneys i Hesk s a member a genes of up to if no name is genee is identified below, the OUNTRY) Corporation or other private geneclosed. 38 is attached. charge the required fee(s), or (enclose an extra ALL ENTITY status. See 37 C	document has been file roup entity Govern r credit any overpayme copy of this form). CFR 1.27(g)(2).
CFR 1.3 Add TO Num 3. ASSI PLE record (A) 1 Please C 4a. The A 5. Char	OUSPEN Tige of corresponden 363). Change of corresponden The Address' indic OSB/47; Rev 03-02 The required. IGNEE NAME AN ASE NOTE: Unleaded to the control The SKA Check the appropriate following fee(s) are issue Fee Publication Fee (No Advance Order - # Inge in Entity Status Applicant claims	ndence address or indication of "indence address (or Change of 122) attached. Tation (or "Fee Address" Indiction (or "Fee Address" Indiction more recent) attached. Upper Indiction of the Indiction of the Indiction of the Indiction of the Indiction of Indiction of Copies	The Address" (37 of Correspondence scation form (se of a Customer BE PRINTED ON below, no assignee n of this form is NO (I)	2. For printing (1) the name or agents OR (2) the name registered at 2 registered at 3 registered (1) at a substitute for B) RESIDENCE Lovelar rinted on the pate b. Payment of Fe A check in Payment by The Direct Deposit Accou	ng on the patent front page, es of up to 3 registered pat R, alternatively, e of a single firm (having a torney or agent) and the na patent attorneys or agents. me will be printed. Iprint or type) or on the patent. If an assign filing an assignment. It (CITY and STATE OR Condition of the fee(s): the amount of the fee(s) is y credit card. Form PTO-20 tor is hereby authorized by ant Number 1813.	ent attorneys a member a comes of up to if no name is genee is identified below, the OUNTRY) Corporation or other private genelosed. 38 is attached. charge the required fee(s), or (enclose an extra	document has been file roup entity Govern r credit any overpayme copy of this form). CFR 1.27(g)(2).
CFR 1.3 Adda TO Num 3. ASSI PLE recon (A) 1 Please c 4a. The A The Dir NOTE: interest	OUSPEN Tige of corresponden 363). Change of corresponden The Address' indic OSB/47; Rev 03-02 The required. IGNEE NAME AN ASE NOTE: Unleaded to the control The SKA Check the appropriate following fee(s) are issue Fee Publication Fee (No Advance Order - # Inge in Entity Status Applicant claims	ndence address or indication of "indence address (or Change of 122) attached. Tation (or "Fee Address" Indiction (or "Fee Address" Indiction more recent) attached. Upper Indiction of the Indiction of the Indiction of the Indiction of the Indiction of Indiction of Copies	The Address" (37 of Correspondence scation form (se of a Customer BE PRINTED ON below, no assignee n of this form is NO (I)	2. For printing (1) the name or agents OR (2) the name registered at 2 registered at 3 registered (1) at a substitute for B) RESIDENCE Lovelar rinted on the pate b. Payment of Fe A check in Payment by The Direct Deposit Accou	sof up to 3 registered pater, alternatively, e of a single firm (having autorney or agent) and the patent attorneys or agents. me will be printed. Sprint or type) ar on the patent. If an assignificant assignment. COTTY and STATE OR COTTY are some of the fee(s) is the amount of the fee(s) is yeared to ris hereby authorized by ant Number 1819. The solution of the fee(s) is the solution of the solu	ent attorneys i Hesk s a member a genes of up to if no name is genee is identified below, the OUNTRY) Corporation or other private geneclosed. 38 is attached. charge the required fee(s), or (enclose an extra ALL ENTITY status. See 37 C	document has been file roup entity Govern r credit any overpayme copy of this form).

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.